

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	METHOD AND SYSTEM FOR SECURE TRANSMISSION OF INFORMATION OVER TELECOMMUNICATION NETWORKS
Attorney Docket Number::	0501-1122
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: ALAIN
Middle Name::
Family Name:: DEBLOCK
Name Suffix::
City of Residence:: VERSAILLES
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 37, RUE CARNOT
Address::
City of Mailing Address:: VERSAILLES
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-78000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: THIBAUT
Middle Name::
Family Name:: BEHAGHEL
Name Suffix::
City of Residence:: BOULOGNE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 13, RUE SAINT DENIS
Address::
City of Mailing Address:: BOULOGNE

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-92100

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: FRANCOIS

Middle Name::

Family Name:: DE CHABANNES

Name Suffix::

City of Residence:: VERSAILLES

State or Province of
Residence::

Country of Residence:: FRANCE

Street of Mailing Address:: 16, RUE DE L'ORANGERIE

City of Mailing Address:: VERSAILLES

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-78000

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: DENIS

Middle Name::

Family Name:: JEANTEUR

Name Suffix::

City of Residence:: ISSY-LES-MOULINEAUX

State or Province of
Residence::

Country of Residence:: FRANCE

Street of Mailing Address:: 111, AVENUE DE VERDUN

Address::

City of Mailing Address:: ISSY-LES-MOULINEAUX

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-92130

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2003/002536	8/14/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02/10367	8/16/02	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::